



**Army Medical
Specialist Corps**

The Medallion

Volume 16, Issue 2

April 2004

Corps Chief's Message

COL Rebecca Hooper

Chief, Army Medical Specialist Corps

Happy Anniversary

Inside this Issue

SP Corps Chief's Message

AOC Chief's Messages

67th CSH 91M receives
Purple Heart

PA's busy at Camp
Muleskinner in Baghdad

31st CSH SPs Standing
Proudly in Balad, Iraq

National Nutrition Month
celebrated in March

Physician Assistant
Symposium continues to
set DL standard

On the 16th of April, the SP Corps will be 57 years young. It is fitting that each of us takes a moment to consider just how significant an event this is. Countless individuals paved the way for us to have the opportunity to serve the AMEDD and the Army. We owe them a debt of thanks for having the ability to envision a Corps in which OTs, PTs, Dietitians, and PAs would contributed so much to so many.

Consider how difficult things must have been back in 1947. How many of us would be willing to be "temporarily promoted to the grade of Colonel" yet only be paid as a Major? Our first Chief, Colonel Emma E. Vogel, did just that in order to get our professions into the mainstream of the Army Medical Department. She also did this after having already worked for the Army since 1917! (I'm guessing she must have been one tough lady.) The message I take from her dedication and willingness to serve so long and against so many odds is simple. She really liked what she was doing.

In her book, Wear Clean Underwear: Business Wisdom From Mom, Rhonda Abrams makes the point that people in the successful companies she studied "bring Mom's fundamental values to the workplace". Motherly wisdom like "how do you know you won't like it when you've never tried it?" stimulates personal growth in the workplace. "Share" can mean sharing ideas, values, and hardship. "Eat your vegetables" translates into focusing on what's important. The people and the companies she studied share similar values like respect and trust, they focus on the important, and at the end of the day they really like what they are doing.

As I travel around and meet with as many of you as I can, it's pretty clear to me that many of you are following in Colonel Vogel's footsteps. For the most part, you really do like what you do. How else could I possibly explain the enthusiasm with which OTs, PTs, Dietitians, and PAs have approached living in tents, dealing with sand everywhere, and missing birthdays, anniversaries, and holidays? How else could I possibly explain the willingness of so many of you to spend countless off-duty hours in hospitals, clinics, and battalion aid stations? How can I possibly thank you?

From the bottom of my heart...



Chief, Occupational Therapist Message

COL Karen Cozean
Chief, Occupational Therapist Section

It is April and I'd like to wish each 65A and 91WN3 a great Occupational Therapy Month! Take some time to share with others the wonderful services you are offering your customers. Market yourselves for no one does your job better than you! I had the opportunity to spend some time with 11 Army OT's at the Philadelphia hand course as well as 11 Navy and AF OT's. I wish I could bottle and sell the energy, professionalism, and passion I saw coming from each officer! The bottle would be a sell out! When you enjoy what you are doing, it really does show, and you can go to bed each night feeling good about what you have accomplished. Your patients thank you and I thank you too!

Operation Iraqi Freedom

We are very glad to welcome home a number of therapists who have returned from Iraq. CPT Jay Clasing is returning to the clinic after leave, and will begin his new job as Chief, OT at Heidelberg; SSG Edward Gayden and SSG Richard Howard are back home with the 85th CSC. SGT Erick Cedeno, is back after his contributions to the 21st CSH. SSG Darryl Suarez is on his way back to Ft. Lewis after supporting the 98th CSC. CPT Florie Gonzales made record speed in going through CRC in El Paso, out-processing at Ft. Jackson, and on to FL to begin his Masters. He is reachable via AKO. We wish him well as he shifts gears to be a full time student. CPT Robert Montz and SGT Dierdre Prator are redeploying and will be back to Ft. Bragg mid April. Keep in your prayers CPT(P) Kurt Brower, CPT Joanna Atherton and SSG Tina Hamilton as they continue to support the 31st and 67th CSH's.

Welcome Direct Accessions

I'd like to welcome our three new direct accessions for 04. CPT David Larres has just completed OBC and is joining the staff at WRAMC. He has been a practicing OT in Hoosier country and has prior military experience. After July OBC, two more therapists will be joining our section: 1LT Jim Burns and 2LT Danny Kang. 1LT Burns has prior OT experience and is branch transferring from the Engineers, and 2LT Kang is ROTC and a new graduate.

CHCS II

WBAMC has been using CHCS II and MAJ Stan Breuer has volunteered to be our point man in helping to standardize and provide copies of templates to you as requested. He has been working with the CHCS II staff to establish an AMEDD wide "repository" for all occupational therapy templates. This will allow all OT's in our system to have access to the templates. All templates should be coded with the words "occupational therapy" at the end, so when you do a template search using occupational therapy as the key word, OT templates will be the only ones that come up. He will be providing more information at our next VTC on April 14th (1430 EST).

14 April VTC (Please Note)

The focus of the 14 April VTC will be on Career Progression for the 91WN3. SFC Lee has asked a guest speaker, SGM Julius Chan, to discuss the realities of what it takes today to be competitive for promotion. Please have as many of your enlisted attend this VTC.

The Myra L. McDaniel Writers Award will also be announced during the VTC. We had four great submissions this year and I thank you for your interest and motivation to write and publish. *(continued on next page)*

**The best thing about the future is that it only
comes one day at a time
Abraham Lincoln**

Chief, Occupational Therapy Message continued

Good News

A big thank you to SFC Carlton Lee and SSG Jackie Robinson who have been working diligently with MSG Oakley at the AMEDDC&S to recruit AD enlisted for our 91WN3 program. The April class (0204) will have 27 students and of those 14 will be AD, so relief is on the way. SFC Lee intends to keep the momentum moving forward. We appreciate your efforts!

Note the change and mark your calendars, the UE NMSE course will be offered this July instead of 13 – 24 Sept 04. I will send you specific dates for the July/Nov courses when LTC Amaker has final confirmation from guest speakers. Our next course will be offered in Nov 04. If you have a reservists who has been activated to backfill your staff for a year, and they have prior hand skills, and you have orthopedic support/approval to provide the six-month mentorship, strongly consider having them attend one of these courses.

CPT Yeager is partnering with the U.S. Army Aeromedical Research Laboratory (USAARL) to survey and determine the reason for poor seatbelt compliance among military drivers in the field environment. For those of you who drive military vehicles, take a few minutes to fill out this anonymous survey to help identify the contributing factors to non-wear. The site for this survey is <http://safety.army.mil>. CPT Yeager is working to design a seat belt that will prevent the belt from snagging and catching on military gear. *Inside Story Headline*



To our SP Soldiers deployed
across the world

Thank You!

Chief, Physical Therapist Message

LTC, Theresa Schneider
Chief, Physical Therapist Section

Welcome aboard to our newly mobilized reserve component PTs

MAJ Peter Battipaglia is supporting the Germany mission
CPT Ken Utzinger is with the 81st Mech BDE in Iraq
CPT Jo Ehrler is serving at Fort Leonard Wood
CPT Katherine McDowall is on board at Fort Riley
CPT Angela Petersen has joined the Fort Bliss team



Hooah to the following Army PTs

CPT Dan Fisher (Fort Jackson)– The 2003 recipient of the Corps Chief's Award of Excellence for the Physical Therapist Section.

MAJ Bill Werling (Fort Jackson) – as founder of SAVE THE WORLD, INC, a non-profit charitable organization, MAJ Werling took leave last November to participate in the organization's humanitarian mission in Vietnam where he distributed wheelchairs for disabled citizens.

MAJ Bob Boyles (School House), MAJ Mike Walker (FLW), and the PTs in SERMC - for their creative traveling road show training program. MAJs Boyles and Walker conducted a 1.5 day course at EAMC last December on evidence-based manual therapy approaches for evaluation and intervention of the extremities. Course participants received 1.6 CEU's through the state chapter of the APTA.

LT Dan Rhon (Fort Bliss) – served as a member of the medical team from WBAMC that traveled to Santiago, Chile in February to present a conference on prevention strategies for ACL injuries. The audience included coaches, trainers, physical therapists, orthopedic surgeons, and athletes from local military academies and military hospitals.

MAJ Mary Adams- Challenger – her hard work and dedication enabled a wounded Iraqi girl to come to the U.S. in February for state of the art spinal cord injury rehab at the National Rehabilitation Hospital in Washington, DC.

CPT Travis Hedman (ISR, Fort Sam) – co-presented with CPT Chapman (OT) at the American Burn Association Annual Conference in Vancouver, B.C, in March. The topic of the presentation was fabricating splints to prevent and correct burn contracture deformity.

LT Nicole Chine (Fort Sill) – EFMB honor graduate during the March EFMB test at Camp Bullis.

**Extraordinary people are most
often ordinary people with
extraordinary determination**
Tony Stremic

Chief, Dietitian Message

COL Brenda Forman
Chief, Dietitian Section

As I prepared to write this update, I realized this will be my last contribution to the MEDALLION. Let me begin by thanking COL Hooper for this opportunity to serve. I am equally grateful to each dietitian, NCO, enlisted service member and all of the civilian employees who keep our Nutrition Care Operations running every day, 7 days a week, 365 days a year. As I reflect over the past 3.5 years, I must say it's been an awesome journey. A journey that would not have been possible without the support I've received from you. I will be forever grateful to each of you for your unwavering support. Although I leave with sadness and some reservations, I know you will be in great hands through the dynamic leadership of LTC Maria Worley. I truly believe that LTC Worley is the right person for this job and will transform Army Dietetics in this 21st Century. I hope you will give her the same level of support as you've given me. As COL Hooper has announced, LTC Worley will be sworn in on **25 May 2004** here in San Antonio. The change of the guard between Maria and I will occur the first week of May and then I'll begin my transition to civilian life. My husband and I will participate in the Fort Sam Houston Retirement Parade on Thursday 27 May 2004.

COL Debra Berthold will also retire effective 31 July 2004. Thank you COL Berthold for your contributions to Army Dietetics and to the AMEDD for the past 25 years. I wish you all the best as you transition from the Army.

Since the last edition of the Medallion, several dietitians and 91M's have redeployed after spending the last 8-12 months in Iraq. These dietitians are **LTC Donna Dolan**, USAR (3rd COSCOM), **MAJ Wayne Kostolni** (28th CSH), **MAJ Colleen Kesselring** (21st CSH), **CPT Julie Boyette** (28th CSH) and many 91Ms. Welcome home OIF Veterans and thanks for a job well done!!

Dietitians who remain deployed are **MAJ Sarah Flash**, **MAJ Sonya Corum**, and **MAJ Roland Talley** and their respective 91M's. **LTC Theresa Kemmer** will deploy in the next 30 days to continue the great work started by LTC Donna Dolan. LTC Kemmer will be assigned to 13th COSCOM.

91M Received Purple Heart

The 67th CSH was recently hit by a mortar attack, and unfortunately one of our 91M's, PFC VanAelstyn was injured. MAJ Flash, her OIC in Iraq has written an article with details regarding the incident and this soldier's award of the Purple Heart. Please keep this soldier in your thoughts and prayers.

Dietitian's Leaving the Army

We have several dietitians who will ETS or REFRAD from the Army in the next few months. These dietitians are: CPT Hillary Harper (Ft Campbell), CPT Paula Wedel (Ft Benning), CPT Kerrie Murphy (BAMC), LT Tamrin Massey (Ft Hood), CPT Jane McMillan (WRAMC), CPT Christine Kaefer (Ft Belvoir), CPT Linda Lio (Ft Campbell), CPT Cheryl Frietch (Ft Leonard Wood), and CPT Jennifer Sherwood (Ft Bragg). These dietitians have made significant contributions to the Army and to Dietetics and represent over 50 years of combined active federal service. Thank you to each of you for a job well done. I wish you all the best in the years to come.

Army Dietitians continue the War on Obesity

Recently, we were invited to participate in an Integrated Process Team led by Tricare Management Activity (TMA) to address the obesity epidemic in the military. LTG Peake has approved COL Gaston Bathalon as the Army's representative on this Tri-Service Committee

2002 DOD Survey of Health Behaviors

This report was recently released and demonstrates what we already know that there is a problem with many health related behaviors among active duty service members to include weight management. The Assistant Secretary of Defense (Health Affairs), Dr. Winkenwerder has directed DOD to develop an Action Plan to address not only the issue of obesity, but several other areas to include injury prevention, cigarette smoking and stress in the military. LTC Vivian Hutson and COL Bathalon will be a part of the committee developing this action plan. *(continued on next page)*

Chief, Dietitian Message continued

Weigh to Stay

I need your continued support with conducting this program and more importantly collecting outcomes. The NOMAD database is being modified to allow you to input follow up data at the 30, 60 and 90-day intervals. AMEDD Senior Leadership constantly asks me the question: What are we doing to combat obesity in the military and among military families. Part of the answer is effective WTS programs, but it means nothing if we have no data to demonstrate the effectiveness on ineffectiveness of what we are doing.

Dietitians Strategic Plan

Many of you are involved as members of strategic objective working groups. If you are not, I encourage you to become involved. We currently have ~ 50 people working on the strategic plan that affects the future of ~ 130 dietitians and over 490 Nutrition Care Specialists. This is your opportunity to help shape the future of our section and have a voice in decisions that affect dietetics. Strategic Objective Leaders are as follows:

Strategic Objective Leader

LTC George Dilly
LTC Gaston Bathalon
COL Laura Kostner
LTC Richard Meaney
LTC Linda Rowbotham
LTC Peggy Jones
LTC Anul Anaychebelu
LTC Laurie Sweet
LTC Maria Worley
LTC Brenda Ellison

Strategic Objective

Maximize the Role of Army RD as DOD Executive Agent for Nutrition
Integrate Nutrition Research into Practice and Policy
65C and 91M Leaders in Army Well Being
Maximize 65C and 91M effectiveness on the battlefield
Maximize 65C and 91M role and contribution to soldier readiness
Recruit and Retain Quality Army Dietitians and Nutrition Care Specialists
Leverage Technologies into Dietetics Practice and Policy
Expand leadership opportunities for 65C and 91M
Optimize TDA practice that translates to Battlefield Healthcare
Lead industry in Nutrition Care Operations Productivity

Again, thank you for your support over the past 3.5 years and best wishes to each of you for a prosperous and exciting future.

Sincerely,

Brenda J. Forman, RD, LD, MEd



COL Forman: Thank you for everything you have done for the Dietitians and SP Corps!

I find the greatest thing in this world is not so much where we stand as in what direction we are moving.

Oliver Wendell

Chief, Physician Assistant Message

COL William Tozier
Chief, Physician Assistant Section

First, let me again say how proud I am of all the exceptional work you are performing and give my support for the hardships you are experiencing. Army PAs are heavily involved with the

war in SWA. Ninety-two percent of PAs are in deployable units, either actual combat units or as PROFIS to combat units. During 2003, roughly 25-32 percent of active duty PAs were deployed at any given time. Some have been deployed for a second time. The war has also mobilized 66% of the TPU and IMA PAs and I expect that 100% of deployable reserve PAs will have been mobilized by the end of 2004. Additionally, 20% of Army National Guard PAs have been mobilized and are serving from the Balkans to Afghanistan. Army PAs can truly say they are an "Army of One" and that all components are sharing in the wartime mission.



Qatar PA Trauma Symposium

I had the opportunity to meet with some of you during a visit to Qatar in December 2003. A PA Trauma Symposium was held at Camp As-Sayliyah, Qatar, hosted by CPT James Jones who was assigned to the Qatar Clinic at that time. Approximately 85 PAs attended from Iraq, Kuwait, Afghanistan, and Germany. The symposium provided the PAs with timely knowledge of trauma skills and information on appropriate infectious disease measures based upon current epidemiological trends. Camp As-Sayliyah is an R&R site in the Persian Gulf and the week long meeting also provided a nice break for many of the PAs, some of whom had not had a day off in over 6 months. They were able to go shopping, sleep in a bed, take hot showers, eat American junk food, and even get a few beers. During the symposium, the PAs were divided into groups to compile their lessons learned into after action reports. These reports were written for the intended audience of fellow PAs who would be following them into SWA. I was able to videotape these reports and they are now being used to instruct the new graduates at the Office Basic Course, PA Track.

Army Regulation 40-68, Clinical Quality Management

AR 40-68 has finally been published. It replaces the old AR 40-68 and also AR 40-48, which you may remember had a lot of guidance on PAs. You can download the new AR from the web at:

http://www.army.mil/usapa/epubs/40_Series_Collection_1.html I want to address some aspects of the new AR that appear in chapter 7-16 and refer to PAs. First, the requirement that PAs have a state license by 2009 is not valid (7-16.b. (3)). This was overcome by a waiver granted from DoDHA while the regulation was in print. In January, 2004, Dr. Winkenwerder, Jr., Assistant Secretary of Defense, Health Affairs signed a waiver for PAs to have a state license. All PAs in DoD, active, reserve, National Guard, and civil service, must meet the NCCPA certification requirements instead of a state license. They must pass the PANCE, log 100 hour of CME every two years, and pass the PANRE or Pathway II re-certification exams. Second, note the explicit guidance that PAs may see children under the age of two (7-16.c.). This clarifies that PAs have credentials to provide care to all categories of patients. However, do not confuse credentials and privileges. Credentials reflect your professional scope of practice, or what you have been trained to perform. Privileges are based upon competencies, what you are currently proficient to perform. If you have not seen an infant in a long time, your supervising physician and the Credentials Committee are justified in limiting your privileges as you may no longer be competent to see young children. Such limitations can be overcome by completing some supervised experience in pediatrics or family practice. Finally, there is a new section at the end listing three competencies in readiness training that all PAs must meet (7-16.f. (2)). The three areas are: ATLS or equivalent every four years, Medical Management of Chemical Casualty Course (MMCC) once, and Tropical/Global Medicine once. Some of you may be able to *participate* in an ATLS course. This does not change the American College of Surgeons rules regarding attendance by PAs (allowed) and certification (not allowed). Most PAs will probably take a trauma course given by their Division Surgeon's office. The MMCC is given at Aberdeen, and there are other courses that provide the similar training (<http://ccc.apgea.army.mil/>), both resident and distance learning. Finally, there are several deployment medicine courses, Combined Humanitarian Assistance Response Training (CHART, [http://coe-\(dmha.org/course_chart.htm\)](http://coe-(dmha.org/course_chart.htm))), Global Medicine (<http://www.brooks.af.mil/web/af/globalm.htm>), 6A-F5 (Principles of Preventive Medicine, <http://www.cs.amedd.army.mil/dphs/CHP/6a-f5.htm>) that will complete the requirement for tropical/global medicine. The purpose of the regulation is to support your training, getting time and perhaps funding from your unit to attend. There is no central funding to support these courses. One way to attend these courses, especially the longer courses like 6A-F5, is to request attendance during your PCS. MAJ Balser at HRC can assist you in putting this together. (*continued on next page*)

Chief, Physician Assistant Message continued:

Young Soldier Healthcare Satisfaction

I mentioned in the December Medallion that I was tasked to work on solutions to the low rate of satisfaction among 18-24 year old Soldiers with their healthcare. I held a steering group in January of this year, assembling active and retired PAs, PTs, physicians, nurse practitioners, sociologist, and medics to develop an actionable set of initiatives. Currently, the overall satisfaction of this young Soldier group is 82% compared to 92% overall for all beneficiaries. The DoD goal is 88%. The steering group came up with a number of initiatives that ran the gamut from education to policy to resources. Right now I am looking for an MTF that would be willing to do a pilot project using the initiatives that were suggested.

New PA Position in OTSG

CPT Larry Clifton serves as a Headquarters Department of the Army (HQDA) Staff Officer responsible for the plans and development of Information Management / Information Technology (IM/IT) strategy in support of Force Health Protection of Soldiers in garrison and deployed environments. This involves work with Health Affairs (HA), Department of Defense (DoD), the Army Medical Department (AMEDD) and other services to meet the Deputy Secretary of Defense for Health Affairs requirement of a single system to capture the longitudinal electronic patient record. He represents the AMEDD to assure the Army's requirements are addressed in order to provide quality medical care from the foxhole to the Medical Center.

Some of the programs he consults on include:

1. Pre/Post Deployment Health Assessment program
2. AeroMedical Data Repository (AEDR/AERO)
3. Defense Medical Surveillance System
4. DOEHS- IH and HC (Industrial Hygiene and Hearing Conservation)
5. CHCS II-T
6. MEDBASE, Health e Forces 2
7. Co-Chairing AMEDD Health Surveillance IPT, also on working groups for the IPT

Bottom line is that PAs who have questions regarding programs, want to request changes, or have solutions to problems, send them to CPT Clifton at larry.clifton@us.army.mil and he will see what can be done. One area where PA feedback came into play recently was an AAR from 2/82 ABN regarding the PIC failure in OIF. This was sent up along with the actual PIC devices and now a redesigned PIC is to be issued to the STRYKER BDE. One Lt. PA who took the time to document his AAR and made this happen. Good work!

Finally, I look forward to seeing some of you at the SAPA meeting in Fayetteville. Once again we will get to recognize one of our best with The Surgeon General's Physician Assistant Recognition Award.

Best wishes to you all,
Bill Tozier



Human Resources Command Update

COL Bonnie DeMars
HRC Branch Chief, SP Corps

Please join me at this time to offer a heartfelt **“au revoir”** and **thank you** to two outstanding SP officers. Both **LTC Polly Gross** (65D career manager) and **MAJ Kerrie Golden** (65A,B,C career manager) are moving on to new assignments. Everyone in the SP Corps knows that they have provided a tremendous service to each of you and have done a spectacular job during their time at Human Resources Command. They worked tirelessly. Meeting the mission needs of the Army as well as the professional and personal needs of officers was always paramount to them.

I, personally, am indebted to them for their professionalism, integrity, and willingness to go the “extra” mile whenever needed. They worked at HRC during periods of tremendous change and adapted well. LTC Gross and MAJ Golden embraced numerous challenges these past few years and can be proud of the outstanding efforts they have contributed to the management of SP officers' careers. Once again thank you.



MAJ Balser, COL DeMars, MAJ Syler

LTC Gross is headed to work at the Pentagon on a medical program for Reserve and National Guard soldiers. MAJ Golden is headed to the Physical Therapy Clinic at Ft. Hood.

It is my distinct pleasure to extend a heartfelt **welcome** to the newest members on the SP Corps Branch Team. **MAJ John Balser** (65D career manager) and **MAJ Barb Syler** (65A,B,C career manager) are now at your service!!! They both bring outstanding skills sets to the job.

MAJ Balser joins us from his recent assignment as Senior PA for the 3ID. He deployed with that unit and was part of the initial war efforts in Iraq. MAJ Balser was a Phase II Coordinator and is an Ortho-trained PA.

MAJ Syler joins us from her recent tour at Walter Reed Army Medical Center where she worked in the Physical Therapy Clinic treating the injured soldiers who returned from OIF and OEF. She has also worked in the MEDDAC and was a Personnel Recruiter for the SP Corps.

What's new? Actually there are a number of things to highlight:

Upcoming Boards: Senior Service College Special Branches 2-11 Jun 04
 Colonel AMEDD/RA 7-16 Jul 04

Korea – AIP – Army Incentive Pay: This is an incentive program for office soldiers who are willing to stay an additional year(s) on Korea rotations. It can be as much as \$300/\$400 extra per month depending on the program you choose. Check out the HRC website for more information.

Permanent Profiles: If you have one, please contact HRC so we can ensure we have the most current information on file.

As COL Hooper often says, “Semper Gumby”. These words are truer today than has been the case for a while. We ask that you remain *flexible and open*. These are challenging times. Not only is OPTempo high, but frequently we are receiving changes to requirements resulting in shorter suspense's to fill various assignments with officers who have the best skill sets for the jobs. We are doing our best to work with officers, but the needs of the Army must be met.

Our Army is at War. It hasn't been easy, but we're working to make it better for you and still uphold our responsibilities to our Nation.

Directorate of Combat & Doctrine Development

LTC Rich Meaney
Nutrition Staff Officer
Directorate of Combat & Doctrine Development

I will use this opportunity to provide information on three medical field-feeding topics: OIF lessons learned, the Medical Nutrition Supplement (MNS) package, and a new tool for estimating patient feeding requirements.

Lessons Learned: I have compiled dietitians' lessons learned from OIF and presented these myriad lessons in one document using the "issue-discussion-recommendation" format. The lessons learned come from dietitians deployed during the first six months of Operation Iraqi Freedom. Topics include operational rations, training, clinical dietetics, sanitation, and many others. You may access this Microsoft Word document by following these instructions: Type this URL in your web browser address bar: <https://acfi.amedd.army.mil/dcdd/> Next, click "enter." When prompted to do so, enter your AKO user name and password. On the next screen, click on "Concepts & Requirements" on the left side of the screen. Then click on "Force Protection Branch." Next, click on "Nutrition Staff Officer." Finally, click on the "OIF Dietitians' Lessons Learned" link near the bottom of the page.

Medical Nutrition Supplement: Based on dietitians' recommendations and lessons learned from OIF, I worked with the good people at Natick's Combat Feeding Program and DSCP to achieve a more useful and slimmed-down MNS package. Mission critical changes to the MNS include twice as much enteral formula as the old MNS; individually wrapped, flexible straws; and reduction in package weight and cube (in order to increase the transportability of the product and to aid in an effort to reduce theft). The NSN for this product is 8970-01-470-5077. Cost is approximately \$1,100.

Diet Estimation Tool: Using OIF patient feeding data from the 21st CSH, 28th CSH, 47th CSH, 86th CSH, and 212th MASH, Mr. Chuck Elliott (Operations Research and Systems Analyst at DCDD) and I developed a patient feeding model that will enable the 65C and 91M to better predict the number and types of meals (regular and modified) to be served to hospitalized patients during the first two months of combat operations. The focus of the model is on the first two months of combat operations, since this is the period of time when the supply system is not well established and therefore likely to be at its worst. The model should be useful to 65C and 91M participating in training exercises at places like JRTC or in preparation for deployment in support of initial combat operations. You may access this Microsoft Excel spreadsheet by following these instructions: Type this URL in your web browser address bar: <https://acfi.amedd.army.mil/dcdd/> Next, click "enter." When prompted to do so, enter your AKO user name and password. On the next screen, click on "Concepts & Requirements" on the left side of the screen. Then click on "Force Protection Branch." Next, click on "Nutrition Staff Officer." Finally, click on the "Modified Diet v4.8 Spreadsheet" link near the bottom of the page.

Feel free to call (210) 295-0308 (DSN prefix is 421) or write (richard.meaney@amedd.army.mil) if you have questions, ideas, or comments.



AMEDD Personnel Proponent Directorate Fact Sheet

AMEDD Personnel Proponent Directorate (APPD)

Requirement: one LTC, 65X

Authorization: one LTC, 65X

Location: Building 44, across from the 5th Army Quadrangle, Ft. Sam Houston, TX

Overview:

- Ensures the SP Corps is structured to allow SP officers the opportunity to pursue a 30-year career
- Maintains and tracks requests for additional SP requirements and Army-wide authorizations
- Maintains Corps strength appropriations (authorizations and training accounts)
- Prepares SP Life-Cycle Models, Objective Force Models, and Force Aging Statistics utilized to determine annual recruiting mission and promotion objectives
- Conducts promotion board analysis

Key Responsibilities:

- Principle staff officer/personnel proponent for all SP AOCs (nearly 1,100 active duty officers and 1,200 Army Reserve Soldiers).
- Serves as Consultant to The Surgeon General (TSG) on SP manpower and force structure issues.
- Develops, analyzes, evaluates, coordinates, and integrates AMEDD-wide and Corps specific personnel issues for TSG and SP Corps Chief.
- Ensures that proposed policies and regulations fulfill the personnel management lifecycle functions for the Army, AMEDD, and SP Corps.
- Conducts staff analysis on issues that change Army policy and SP personnel management.
- Monitors the changing Army force structure for impact on SP TOE/TDA positions, medical doctrine, materiel, training, and evaluation.

Knowledge and Skills gained:

- Thorough understanding of how the Army develops manpower structure.
- Knowledge of the complexities of AMEDD training.
- Understanding of HA and AMEDD relationship and funding system.
- Understanding of promotion board processes and instructions.

Point of Contact: (210) 221-9941 DSN 471-9941

Office Symbol: (MCCS-DO)

Mailing Address:

Commander, AMEDDC&S
AMEDD Personnel Proponent, Building 44
ATTN: LTC George Dilly
1400 East Grayson Street, STE 213
Fort Sam Houston, TX 78234-5052



Directorate of Combat Doctrine and Development Fact Sheet

Directorate of Combat Doctrine and Development (DCDD)

Requirements: two CPT, 65C; one COL, 65D

Authorization: one COL, 65D

Location: Building 44, across from the 5th Army Quadrangle, Ft. Sam Houston, TX

Overview:

- Staffed by a PA (65D)/dietitian (65C)
- Assists the AMEDD in determining Combat Health Support/Force Health Protection future operational capabilities support the Army across the continuum of operations from war to SASO.
- Determines and develops concepts, organizations, material and doctrine for future combat health support in support of the warfighter.

Key Responsibilities:

- Primary consultant for Echelon I and II Force Health Protection and front line primary care.
- Develops concepts and requirements that lead to the successful integration of products and doctrine that is cost efficient, technologically advanced, and user friendly.
- Supports and assists in the development of Force Health Protection concepts and requirements to support the future vision of the Army Warfighter.
- Evaluates developments in medical science and technology in all future health professional's functional areas to ensure a comprehensive, integrated, and seamless system of soldier care.
- Provides input on force modernization issues.
- Serves as the combat development clinical consultant to The Surgeon General.

Additional Information: <https://ke.army.mil/ke2/index.php?cid=8>

Knowledge and Skills gained:

- Army Acquisition process for new equipment and force modernization.
- AMEDD doctrine development.

Point of Contact: (210) 295-0536; DSN 471

Office Symbol: MCCS-FCC-O

Mailing Address: Commander, AMEDDCS
ATTN: MCCS-FCC-O
Bldg 44 Rm 209
1400 Grayson
Ft Sam Houston, TX 78234



Directorate of Health, Education, and Training Fact Sheet

Directorate of Health, Education, and Training (DHET)

Requirement: one LTC, 65X

Authorization: one LTC, 65X

Location: Building 4011, Ft. Sam Houston, TX

Overview:

- Promotes educational opportunities for SP and VC officers
- Seeks and justifies funding for existing and developing educational programs
- Advocate to insure professional soldiers get the education they need
- Interacts with different technologies to bring educational opportunities to SP officers

Key Responsibilities:

- Executes the Central Training Program budget (\$880,000 for FY 03) for the SP Corps and the Veterinary Corps with 1,550 officers worldwide.
- Advises and serves as the staff officer to the SP and VC Corps Chiefs on postgraduate educational issues.
- Administers all aspects of the 25 SP and VC Professional Postgraduate Short Course Programs (PPSCP).
- Assists PPSCP Project Officers in planning and executing the PPSCP.
- Develops, disseminates, and coordinates the annual SP Corps Long Term Health Education and Training (LTHET) message for 17 advanced programs (master's, PhD, residency, etc.).
- Collects and prepares application packets for the annual LTHET selection board and serves as the recorder for the selection board.
- Manages and advises 50 LTHET students and monitors academic progress and tuition issues for SP and VC officers.

Knowledge and Skills gained:

- Managing budget limitations and restrictions for training purposes.
- How LTHET board process works.
- Knowledge of how technology can be leveraged to improve soldier access to training opportunities.

Point of Contact: (210) 295-9428 DSN 471

Office Symbol: MCCS-HEA

Mailing Address: Commander, AMEDDCS
ATTN: MCCS-HEA (LTC Kuwamoto)
1750 Greeley Rd, Bldg 4011, Stop7A
Ft. Sam Houston, TX 78234-6122



AMEDD C&S: Nutrition Care Branch

LTC Laurie Sweet
Chief, Nutrition Care Branch, AMEDDC&S

Congratulations to CPTs Scott and Tanya Crail on the birth of their daughter, Allison.

Congratulations to SSG(P) Murrell for passing the Certified Dietary Manager (CDM) exam and to SSG Schutz for passing the Certified Food Protection Professional (CFPP) exam.

Thank you for submitting input for our recent task selection board. We updated all 91M tasks to reflect current operations and are in the process of completing task analysis for publication in an updated Soldier's Manual.

DTR Teleconference: We recently held a teleconference to troubleshoot issues encountered by Soldier's enrolling in the program. Watch your email for more information.

Please check out the Dietitian section on the SP Home page. MAJ Spielmann recently posted some training information on "Nutrition Care Activities Reports". Great for OPD, NCOPD, and civilian training. Check it out!

We are getting very close to completion of our new training facility. The facility will be named after the first Chief, Dietitian --- MAJ Helen Burns-Gearin. The grand opening is tentatively scheduled for 15 July 2004.

AMEDDC&S: N9 Program

MAJ Tracy Smith
Program Director 303-N9, AMEDD C&S

Greetings from the Physical Therapy Technician Program! We are continually working on innovative ways to keep our program advancing with the ever-evolving field of Physical Therapy. Our goal is to produce and supply the clinics with the best technician possible. The question my staff and I continually ask ourselves about our students is "would I want this person to come and work for me?"

One of the areas that we have worked hard to improve is to increase the student's ability to instruct and progress a patient through a therapeutic exercise program. One result of our efforts is a state of the art Therapeutic Exercise manual with over 500 pictures and explanations of exercises. This manual is NOW in electronic format so we can easily update and add information. We can also put the book on CD, send it out to the clinics with our students or mail it out to anyone who is interested! And, for even better convenience we are looking at getting a downloadable version of this put onto our website at www.cs.amedd.army.mil/ptsc. Check it out!

We are also making every effort to stay up to date with the wartime needs coming from Iraq and Afghanistan. We are responding to the increasing numbers of wound and amputee patients by overhauling our Wound Care and Amputee classes. We have added hours to both of these blocks of instruction and are working with staff from the ISR unit to improve the techniques taught to the students in burn and wound care. Additionally we are working with the Baylor staff to ensure our amputee material is compatible with the information their students receive. We want material that is relevant and easy to implement at the clinic level. We are proud of the high caliber students we produce and are always interested in your suggestions on ways we can continue investing in this program

I'd like to congratulate LT Dennis Thomas (Navy) for recently earning his Master's Degree in Health Care Administration from Webster University and SSG (P) Ensley for earning his Bachelors Degree in Business Administration from Wayland Baptist University. We promote and support self improvement among the staff and strive for the best for our students! Enjoy your spring!

2004 SP Monthly VTC Schedule

This is a tentative schedule. Any changes will be posted to the SP Corps web page under VTC schedule. All VTC's are scheduled from 1400-1700 EST. The first session is from 1400-1530 EST and the second session is from 1530-1700 EST.

4 Apr	1. Cancelled 2. OT	8 Sep	1. OT 2. TBA
12 May	1. OT 2. PT	6 Oct	1. PA 2. TBA
16 Jun	1. Council of Colonels 2. TBA	10 Nov	1. OT 2. DT
14 Jul	1. OT 2. DT	8 Dec	1. PT 2. Council of Colonels
11 Aug	1. PT 2. PA		



Good leadership involves responsibility to the welfare of the group, which means that some people will get angry at your actions and decisions. It's inevitable-if you're honorable. Trying to get everyone to like you is a sign of mediocrity: You'll avoid the tough decisions, you'll avoid confronting the people who need to be confronted, and you'll avoid offering differential rewards based on differential performance because some people might get upset. Ironically, by procrastinating on the difficult choices, by trying not to get anyone mad, and by treating everyone equally "nicely" regardless of their contributions, you'll simply ensure that the only people you'll wind up angering are the most creative and productive people in the organization.

GEN Colin Powell

Operation Iraqi Freedom:

9 March 2003, The Day We Dedicated to PFC Trista VanAelstyn, 91M

MAJ Sarah Flash
Registered Dietitian, 67th CSH,
Mosul, Iraq

As a 65C in the Army, I am fortunate to have experienced diverse challenges. I have worked in Production & Service, the Nutrition Clinic, specialized as a Pediatric Dietitian, Instructed at the Quartermaster School and worked with the Culinary Arts. I have been PROFIS and experienced weeks in a field-training environment. However, nothing prepared me for the reality of deploying to a hostile environment. And, never did I picture myself watching one of my Soldiers get a Purple Heart.

To update you, I am deployed with the 67th CSH currently serving up in Mosul, Iraq. The 67th CSH is split three ways providing Level III healthcare in vicinities of Mosul, Tikrit and at the Abu Ghareb prison near Fallujah. Twenty-two 91Ms deployed with me in January from Wuerzburg, Germany- 11 to Mosul and 11 to Tikrit. We are staffed well at both locations considering Kellogg, Brown and Root does the cooking. However, these dining facilities are not within walking distance, making it difficult to directly support the hospital's staff and inpatient feeding requirements. Both facilities mermite hot meals from the contract dining facilities and 91Ms serve the hospital staff and patients. Those CSH personnel able to get away from the hospital site for meals take a bus to the contract dining facility.

The inpatient count at both facilities averages about six. Our inpatients consist of Soldiers (American and coalition), civilians (contractors and Iraqis) and Enemy Prisoners of War. Most Americans are treated and returned to duty or air evacuated back to Landstuhl within 2-3 days. The nutrition challenges tend to be the Iraqis or contract civilians since they tend to stay the longest, have poor lifestyle habits to begin with, are older and many speak little or no English. We do see a few outpatients usually during sick call when we can capture them. As the number of Soldiers downrange shrinks and contractors increase, we are seeing more cardiac issues, diabetes and all the things we typically see in the rear in our clinics. I am told FOB Diamondback has over 300 contractors and that number will increase to over 1000 this year.

To tell you a little about where I am residing, Mosul is the town where the 101st Airborne Division fought and killed Saddam Hussein's sons Uday and Qusay. Mosul is currently "red". And, it is safe to say that we are not exactly wanted here. We are not at "war", but I hear small arms fire day and night outside the wire. Some days it sounds like it is right outside the hospital or my trailer. Other days are quiet. Now, not experiencing mortars before, I can tell you that they are another experience. Mortars hit when you least expect it and the earth moves. You soon become jumpy to backfires, doors slamming or something falling. You start to hear mortars in your sleep.

This is not to scare anyone or deter them from deployment. There are always risks and rewards on deployments. And, it is an experience I would not trade for anything. However, in recent days, the risks were increasing and the mortars were hitting close and more frequently. Plus, we were getting air bursts and rockets. The pattern of morning and evening hits changed to mid-day. The mortars take off (the first boom) and whistle overhead..."bunkers, bunkers, bunkers" is called over the loudspeaker and then you feel and hear the impact. You run for cover to the closest concrete bunker or hit the ground. On 9 March, shortly after noon, the bunker call took an unfortunate turn. This impact was close, I knew that. Just how close I did not realize. We had all been in the hospital dining tent eating lunch.

Sitting in the bunker, the radios were not as quiet as usual while we waited for the "all clear". You see, normally we try to do fun things to pass the time while in the bunkers. This day was different. Radios immediately called for Medics to our LSA... "direct hit on the "A" row" (of trailers). These trailers are two-man containers we live in right beside the hospital. I took note of the 91Ms on shift during lunch and who was not currently working in Nutrition Care. There were two 91Ms not physically with me in the bunker or who were in the NCD area - SGT Albritton and PFC VanAelstyn. I had noted earlier that PFC VanAelstyn had signed out to go make a phone call at MWR and then to finance. I asked PFC Marshall if she had seen VanAelstyn. "She got back". I pulled out my little green book. Who is in the A row? I reside in the A row and so did SGT Albritton and PFC VanAelstyn. I hear traffic on the radio...there are casualties. "Where is the ambulance?" "It's on its way". Immediately soldiers in the bunkers started crying and anxiety grew. The last week had been more intense anyway. Who were the casualties? We had to wait in the bunker. I had been seeing casualties through the EMT and on the ward for weeks, but when it hits your own unit, it is a strange feeling. These are people you know personally and work with every day. *(continued on next page)*

Operation Iraqi Freedom:

9 March 2003, The Day We Dedicated to PFC Trista VanAelstyn, 91M

About that time, SFC Alvin Edwards, NCOIC, Nutrition Care came up to our bunker and called for me. SFC Edwards is a Platoon Sergeant and wears one of the iCOM radios. He had been to the scene. My heart sank. It had to be PFC VanAelstyn or SGT Albritton. Not that any other member of the CSH would have made a difference, but it was "my" soldiers. It was PFC VanAelstyn. She had been in her room on her bed and was injured when the rocket went directly into two trailers. 67th CSH soldiers in the area had busted the door and window and pulled her out. She was conscious, trying to get out of her room in the smoke and chaos, but bleeding. We ran to the EMT to meet the ambulance. My heart was racing...I felt a huge lump in my throat. I had to hold it together. I did not want to get in the way, but needed to find out how she was doing. Others were injured, but apparently not like Van.

I had left the bunker with Soldiers trying to cope with the unknown. They did not know who the casualties were or the extent of their injuries. But the 91Ms there knew SFC Edwards and I were called so it had to be a NCD Soldier. I could see her on the litter in the EMT. I could see her face had a huge laceration, and she was bleeding. They were tending to her elbow, knee and face. One of the ER nurses saw me and assured me that PFC Van was going to be okay. She was immediately taken to the Operating Room. At that point I walked away. This was intense. I held back the tears of relief and thanked God for watching over us. She was going to be okay.

The hours that followed were difficult emotionally and mentally. The plates of food folks had left on the table as they ran for the bunkers were still lying on the tables in the dining tent. The serving line still had the pans of food on them. No one was interested in food now and our staff was left to clean up the mess in the DFAC all while trying to deal with the emotions and worries about Van. Shock and disbelief hit the soldiers of the 67th CSH. Everyone wanted to call home or email home. The internet/email was blocked. There were other injuries to tend to, the living area to deal with (now we all had to move to other containers on the North end by night fall), and nerves to calm. The chaplain was dealing with soldiers in shock and trying to lessen frazzled emotions. The Nutrition Care staff was empty that day. The tears and withdrawn, distant expressions still lay in my mind. They were worried about their comrade and best friend, the reality of the mission, and what lie ahead. Reassurance from me was not enough. They had to see Van, but had to wait until she got to the ward. Those hours seemed like days.

We all got to see the trailers after the remains of the rocket were removed. SPC Crosby was allowed in because it was her room too. SGT Snipes-Green and SPC Crosby started inventory of what was salvageable. Shrapnel holes peppered SPC Crosby's uniforms and possessions. About that time we learned that a large portion of the rocket was still intact. PFC VanAelstyn had an angel watching over her that day. Had that rocket exploded to capacity we could have lost her and many more. And the personnel in the rooms around her were not in their trailers mid-day because they were at work. Guardian angels were certainly watching over the 67th CSH.

PFC VanAelstyn received her Purple Heart from BG Reynolds on 11 March 2004 and was air evacuated to Landstuhl on 15 March. She also has the shrapnel removed from her back as a reminder of what she endured. She is recovering in Wuerzburg, an inspiration to all. Despite her injuries she never complained or let us know her pain, but amazed us all with her insistence on doing for herself and getting out of bed as soon as possible. The CSH Soldiers needed to see her getting better for their own morale. She wants to come back to Iraq someday to be with her 67th CSH family. We miss her, send her all our best wishes to get well fast, enjoy some rest and recuperation and hope to see her smile real soon whether here in Mosul or back in Wuerzburg. The Operating Room door and NCD Board are dedicated to "PFC VanAelstyn, 67th CSH, 9 March 2004, an inspiration to us all."

Update 24 March: We moved to a new living area that night and moved our hospital to a temporary concrete building on the other side of the airfield within one week. Teamwork was at its best. NCD at Mosul set up a 4-section temper next to the hospital and no longer mermite meals. We are located right down the street from the contract Dining Facility. Our 91Ms feed inpatients only now and run a "morale" area with coffee and light snacks. They also screen the new inpatients. Those not working in the section are supporting sections short of personnel, the Company, the TOC or supporting other missions as gunners on convoys or planning morale events. Our new hospital is being built and should be complete this summer. It is right next to our temporary facility so the move should be easy.

You can check out our 67th CSH Downrange website at
<http://www.wuerzburg.healthcare.hqusaureur.army.mil/67th%20CSH%20Downrange.htm>

67th Combat Support Hospital:



PFC VanAelstyn, 91M, received the Purple Heart from BG Reynolds, 2nd Med Bde



SPC Hinojosa, 91M, reenlisting in Iraq



67th CSH Dining Facility



MAJ Sarah Flash, Dietitian with 67th CSH at Camp Virginia



NCD Mosul –
SFC Edwards, MAJ Flash, PFC VanAelstyn,
PFC Ojeda, SPC Crosby, SPC Deierlein-
Sharp, SGT Albritton, SPC Hernandez, PFC
Davis, SGT Thibodeau, PFC Marshall
Not Picture – SGT Snipes-Green



NCD Tikrit –
SSG Barker, SFC Bee, SPC
Woods, PFC Glenn, SPC Haynes,
SPC Moore, SPC Diver
Missing – SGT Jones, SPC
Hinojosa SPC Charlemagne and
SPC Saucedo

PA's at Camp Muleskinner in Baghdad

*CPT John Detro
PA, MED Troop, RSS, 2ACR, Baghdad*

CPT John Detro (MED Troop, RSS, 2ACR- PROFIS), 1LT Mark Walther (2/37 Armor, 1AD), and CPT David Broussard (4/2 ACR) conducted two EMT-B Refresher Courses for 60 medics. The courses were in line with the need for 91W to retain their EMT-B Certification. Students received 24 hrs

of CEU's from lectures, hands on training, written and practical examinations. In addition, the providers conducted a CPR Recertification Course for 50 medics.

CPT Detro organized three fun runs. The first conducted on Christmas Eve had over 250 runners. Each participant received a free commemorative T-Shirt. Overall Winner's received a free pair of Brooks running shoes, top three individuals per age group received commemorative coins and multiple items were raffled. CPT Detro won the 10km in 35:50. The event was so successful that a second run was conducted on Valentine's, Day. During this event, two Ranger PA's led the day. CPT Detro won the 10KM in 34:13 and 1LT Mark Walther won the 5.5km in 19:33. On Saint Patrick's Day, CPT Detro won a 5.5km run in 18:26.

CPT Detro and 1LT Walther conducted two MEDCAPS for local communities. They provided medications, vitamins, and immunizations to local children.

CPT Detro assisted in the removal of a hemangioma from an Iraqi child. CPT Detro arranged for and transported the child to an Iraqi hospital to arrange for MRI. In addition, he assisted in arranging the surgery. While moving to the hospital for surgery, the providers were hit by an IED. CPT Detro sustained minor injuries. The convoy continued to Saint Raphael's Hospital, where the tumor was removed without complications. The child is doing well.

CPT Detro/1LT Walther conducted numerous military operations with the first integrated ICDC Special Forces Unit (soldiers of Turk, Shia, Sunni, and Kurdish backgrounds).



Left to right: 1LT Mark Walther, CPT John Detro and CPT David Broussard



CPT John Detro, PA with MAJ Dan Shuman, Squadron Surgeon, MED Troop, RSS, 2ACR on Christmas Eve



CPT David Broussard, PA, grading EMT-B student



CPT Detro, PA, at the bedside of Hadr Sadim, child with benign hemangioma



CPT John Detro, PA, with local Iraqi women and children

The Specialist Corps- Standing Proudly in Balad, Iraq (Camp Anaconda)

*MAJ Sue Davis
PT, 31st CSH, Balad, Iraq*

Here at Camp Anaconda, at the 31st Combat Support Hospital, all the Specialist Corps folks share the same section tent in the hospital – and it's the busiest, most rockin' section!

MAJ Sonya Corum (dietitian) has her office in the back, but spends long, long hours in the hospital chow hall, making sure both staff and patients get hot and nutritious meals. Additionally, she has become the "CSH mom" to so many young soldiers, always ensuring that everyone is fed and happy. CPT Kurt Brower (Occupational Therapy) "tolerates" being sandwiched between PT and Nutrition Care, seeing his patients wherever he can find an extra bit of space. His skills have been absolutely invaluable out here – seeing traumatic finger and hand injuries in record numbers. No one is more grateful for him than the PTs. We're glad we don't have to get out the anatomy books and figure out all that hand stuff. The PT staff (MAJ Sue Davis, CPT Chad Rodarmer, SSG Rob Skaret, SSG Thomas Goyt) stays plenty busy working at the TMC educating doctors, um, I mean seeing patients, assisting with wound care on our primarily Iraqi inpatient population, and doing an interesting version of orthopedic rehabilitation in somewhat archaic conditions.

We are all enjoying the challenge (or trying to) of being creative and "making do" with such limited supplies and somewhat outdated equipment. We feel lucky to have each others' support – humor, albeit dark at times, is the order of the day for coping with this crazy place, and we love our dysFUNCTIONal combat family.



Life is either a daring adventure or nothing. To keep our faces toward change and behave like free spirits in the presence of fate is strength undefeatable

National Nutrition Month celebrated in March!

2LT Katrina Calhoun
Brooke Army Medical Center Dietetic Intern

BAMC Dietetic Interns Sponsor National Nutrition Month

National Nutrition Month (NNM) is a nutrition education and information campaign sponsored annually by the American Dietetic Association.

The campaign is designed to focus attention on the importance of making informed food choices and developing sound eating and physical activity habits.

We have been successful thus far with NNM through our planned educational presentations at local schools and educational booths located at the commissary, gym, BAMC and at the troop dining facilities. March is not over as our educational efforts continue.

During the first week in March, 2LT Maureen Giorio lead the effort in educating Cole High School students about the importance of the Food Guide Pyramid (FGP), portion sizes, healthy snacking, dietary supplements, and sports nutrition. 2LT Giorio followed the ADA guidelines when creating lessons plans and activities for the various age groups. The average class was fifteen adolescents and each dietetic intern taught two classes. After school, 2LT Calhoun and 2LT Poyourow also spoke with the girls track team educating 23 young women on the necessity of proper nutrition for peak performance.

The Dietetic interns and other BAMC staff taught over 600 students at Fort Sam Houston Elementary School. They provided instruction for half-hour sessions on the FGP, portion sizes, and other individual activities they brought with them. All dietitians used the American Dietetic Association's National Nutrition Month curriculum. Ribbons and stickers were provided for all student participants in hopes of increasing nutrition knowledge with fun activities.

The commissary has had a nutrition display located in the produce section for the entire month of March organized by 2LT Susan Campbell. A display board was created and handouts of fiber and proper sanitary precautions were made available. Each Thursday one dietetic intern manned the booth from 1100-1200hrs answering dietary questions. Over 500 BAMC approved handouts have been distributed. Plenty of free information, suggestions and recipes for good health continue to be distributed until 31 March. At the end of the month eight prizes will be given to the winners of the weekly questionnaires.

2LT Jonathan Poyourow coordinated another educational booth at the at the Jimmy Brought Fitness Center. Topics Included nutrition and muscle growth, sports drinks, proper hydration pre and post exercise, exercise tips while away from home and helpful nutrition fact sheets on popular carbohydrate food items. Over 700 handouts on the previous topics have been distributed over the course of the months.

2LT Rachel Villarreal designed displays and online quizzes for the BAMC dining Facility.

The BAMC Marketplace explored new vegetarian soups courtesy of the Marketplace staff for each Friday in March. The first half of the month featured fad diet displays, provided quick and easy to understand facts on the latest crazes in dieting, and the over effect on nutritional. The second half of the month has been featuring facts on hidden sugars within diets. This allowed individuals to visualize how much sugar is contained in certain foods. Both displays were in the dining facility for patrons to read and learn about important nutritional topics.

Finally, 2LT Calhoun coordinated with the BAMC Beat and Fort Sam Houston News Leader to publish six articles over the course of the months. The initial article informed the Fort Sam Houston community about the importance of National Nutrition Month and where the Dietetic interns would be throughout the community. The following articles provided research on fad diets, supplements, fiber, and Trans-fats.

Nutritional Hot Food Challenge at Fort Lee

MAJ Sandra Keelin
Fort Lee, Quartermaster School

During the month of March, Army culinary teams from installations all over the world came head to head for the 29th Annual U.S. Army Culinary Arts Competition hosted by the Army Center of Excellence, Subsistence, U.S. Army Quartermaster Center and School at Fort Lee, VA. A unique part of this competition is a two-hour Nutritional Hot Food Challenge where two chefs, working as a team, must prepare and present ten servings of a two-course meal that meets current dietary recommendations. MAJ Sara Flash first introduced this category in 2001 during the 26th Annual Show in celebration of National Nutrition Month and to increase nutritional awareness and menu planning abilities of Army food service specialists.

Each team's menu was previously analyzed and reviewed by the team's respective installation dietitian and then evaluated by MAJ Sandra Keelin, QMC&S Dietitian. Using strict American Culinary Federation standards as criteria, judges critiqued each team on the following areas of organization, sanitation, teamwork, professionalism, taste, texture and flavor combinations, presentation, proper cooking & temperature, nutritional creativity and overall understanding of the concept of nutritional cooking.

This year MAJ Keelin invited fellow dietitians, CPT Nicole Keeney, CPT Suzanne Akuley, and CPT Jason Woodward to participate in the evaluation of the Nutritional Hot Food Challenge alongside Culinary Judges from the American Culinary Federation. The RD's inspected participant's mise en place (to make sure they used only the ingredients listed in their previously nutritionally analyzed recipes/menu plan) and ensured participant's used cooking techniques conducive to nutritional cooking. After each team completed their meals, the RDs were able to enchant their palates with the culinary delights.



CPT Akuley, MAJ Keelin,
 CPT Keeney and CPT Woodward.



Although all menus were winners, this year's Nutritional Hot Food Challenge team champions were USAREUR's SSG Josua Rine and SPC Scott Graves. Their menu earned a silver medal in this category.

Pan Seared Sea Bass
 Grilled Polenta and Wilted Spinach
 Topped with Tomato Concasse' and Oven Roasted Sauce and a Herbed Cracker
 Apple Latke topped with Passion Fruit Custard

DDEAMC busy during National Nutrition Month

Dietitians and 91Ms at Dwight D. Eisenhower Army Medical Center (DDEAMC) divided National Nutrition Month Activities into three areas of emphasis. These areas included the Fort Gordon community, installation dining facilities, and DDEAMC. Over a dozen activities were executed throughout the month. "Brown-bag" lunch seminars for hospital staff, commissary tours, and nutrition displays were just a few of the activities that dietitians conducted that made this years campaign a success. 91Ms were especially involved in communicating the importance of good nutrition to the Soldiers in each of the dining facilities on post.

MAMC hosts National Nutrition Month Fun Run!

On 16 March 2004 the Nutrition Care Division at Madigan Army Medical Center celebrated National Nutrition Month with a fun run. Approximately 40 runners and walkers participated in the event. All participants received a t-shirt and an "Eat Smart, Stay Healthy" water bottle. The first place male and female received a fruit and nut basket courtesy of NCD. 1LT Angela Tague organized the event and presented the prizes to the winners.



(left to right) Markus Dennis (1st place male), LTC Beverly Patton (C, NCD), LTC Lynn Wilkinson (NCD), and LTC Jane Pytlewski (MCED NC).



Runners take off for the fun run!

Making wise choices: Dietitians can help with weight loss

Laurie Kemp

*Winn Army Community Hospital, Ft Stewart
Public Affairs Officer*

Keith R. DeMartini is the kind of guy who once believed "if it was there to be eaten, and it wasn't going to kill me, I'd eat it."

But that mentality toward food got him into trouble and it took effort for him to get back on the right track. The 50ish school teacher, a retired sergeant first class, once stood at 224 pounds where today, he weighs about 180 and is continuing to shed the weight.

Today, DeMartini is a success story, but it took him about two years to follow his own advice – "If you want to achieve anything, you have to be dedicated and willing to make a sacrifice."

"I'd gotten up to around 224 pounds and I was getting uncomfortable with the weight," DeMartini said. "(I wanted to do something) but being a school teacher didn't leave me with much flexibility during the daytime" to seek professional help. Determined, DeMartini set out and accomplished his mission to talk to a dietitian at Winn Army Community Hospital.

"I was just expecting her to give me some information so I could do it (lose weight) on my own," he said. But that wasn't how chief dietitian Capt. Kimberly Brenda saw the opportunity that afternoon.

For Brenda, this meeting was a great opportunity – for both of them.

"Individuals don't usually readily seek out dietitians," Brenda said. "They think we're the food police and that we're going to make them eat everything raw and take away all of the fun foods."

But she explains that that just isn't the case and there is more to successful weight loss than just food choices.

According to Brenda, people must have personal motivation and the right attitude.

"I find my biggest challenge is trying to find the key to motivate individuals," she said, "especially those who don't personally see the need to come but were referred." However, with DeMartini, it was his choice to seek help and he walked in the door with the right attitude and willingness to learn what needed to be done.

"She ... explained what had to be done and she was willing to open her schedule up to work around mine," he said. "I jumped right at it. It was the best of both worlds for me – to get professional advice and come after school."

Brenda and DeMartini talked about his goals and what needed to happen from there to make them a reality.

Part of his plan called for learning about how much a serving size is and keeping a food journal. With the food journal, he was able to keep track of what he ate, what time he ate it and how many calories and fat grams the meal consisted of.

"This has been an eye-opening experience," he said. "I was kind of leary at first – (thinking) '4 oz. of this, half a cup of that – now come on, how is that going to fill me,' it looked so small!" he said.

"Now, I realize what a real portion is, what I should be eating and that it's not a sacrifice. I've (continued to) eat everything I like and I'm seeing the benefits for eating it in the right proportion."

"I'm making wise choices now," he said.

National Nutrition Month Research Seminar

Role of vitamin E and oxidative stress in exercise

CPT Susan Jordan
Research Dietitian, USARIEM

Jennifer Sacheck is currently a research fellow at Harvard Medical School in the Department of Cell Biology where she is studying the molecular mechanisms underlying muscle growth and atrophy. She received her Ph.D. from Tufts University in Nutritional Biochemistry while working in the Nutrition, Exercise Physiology and Sarcopenia Laboratory. She also received her Master's in Exercise Physiology at the University of Massachusetts, Amherst. During both her Ph.D. and Masters' work, Dr. Sacheck focused on exercise-induced muscle damage and repair mechanisms and how nutrition modulated these responses – especially antioxidants and vitamin E. She has worked with diverse populations ranging from Division I collegiate athletes and “weekend warriors” to persons with special medical conditions and elderly individuals.

Approximately 50 people attended the National Nutrition Month Research Seminar on the role of Vitamin E and oxidative stress in exercise. Dr. Sacheck spoke for 45 minutes on the role of vitamin E supplementation during and after exercise. She presented numerous studies investigating the hypothesis that the use of dietary antioxidants like vitamin E may reduce exercise-induced muscle injury and inflammation. It appears that the body's own enzymatic antioxidant defense mechanisms may be the most beneficial and to ameliorate this process with an antioxidant such as vitamin E would do more harm than good. She presented several studies of the use of vitamin E to reduce exercise-induced muscle injury that had mixed results with some possible benefit pointed to environmental extremes like high altitudes. She pointed to a multitude of factors including the antioxidant(s) tested, the nature and timing of the exercise, the age and fitness of the subjects, and the methodology for assessing oxidative stress that make justification for vitamin E supplementation unwarranted.

WAMC celebrates National Nutrition Month

Erin Dorval, 91M
WAMC

“Eat Smart, Stay Healthy”

That is the theme this year for National Nutrition Month held every March. The Registered Dietitians (RDs) and 91Ms (Nutrition Specialists) at Womack Army Medical Center took the opportunity this month to put out nutrition information for the Fort Bragg Soldiers, families, and the community.

Nutrition Care kicked off National Nutrition Month at the Womack Army Medical Center troop formation. For the battalion run refreshments and handouts were available for all participating in the run.

The RDs and 91 Ms have worked together to put out information on many nutrition topics. Weekly displays on Prenatal, Diabetes, Healthy Heart, and Sports Nutrition were displayed at the Dining Facility entrance. Also on the lobby floor of Womack Army Medical Center (WAMC) a general Nutrition display was up for the entire month. Womack Army Medical Center offers Healthy Heart, Diabetes, Smoking Cessation and Weight Reduction classes for Soldiers, retirees, and family members.

Not only did Nutrition Care offer the hospital educational information, the Nutrition Care Specialists and Dietitians set up an interactive nutrition display for the Child Youth Services Nutrition Festival located at Army Community Services. Prenatal and Basic Nutrition displays along with handouts were displayed in Robinson Health Clinic. The Registered Dietitians also taught a class to AIT soldiers on nutrition and fitness. Nutrition Care Division also held a Dining Facility Competition for several dining facilities on post to compete and win a trophy for first, second, and third place. The Dietitians and Nutrition Care Specialists inspected the dining facilities for healthier choice foods, food preparation methods, menu variety, and consistency in food preparation and nutrition information displays.

Basic nutrition is important to stay healthy and live a longer, happier life. With appropriate exercise and improved eating habits, you can reduce your risk for many diseases such as Diabetes, Heart Diseases and certain cancers. Consult your primary care manager with any questions you may have. Remember, “EAT SMART, STAY HEALTHY” for you and your family.

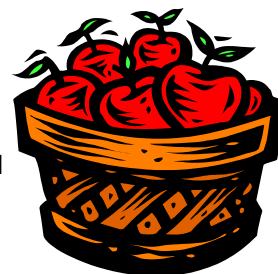
Ft. Knox celebrates National Nutrition Month

THE LEANER WEIGH, a low-fat/high fiber series presented by 1LT Lauren Popeck.

This series covered "Fat," "Fiber," "Eating Out," and "Supermarket Smarts" with a tour at the Fort Knox Commissary.

1LT Popeck also conducted a healthy recipes and food sampling at the Ireland Army Community Hospital dining facility. Low-fat, heart-healthy meals were served for lunch in the hospital dining facility every Thursday in March. Recipes and Nutritional Facts Sheets were available. The special meals included: Low-fat oven fried chicken, Tofu veggie stir-fry w/ sesame seeds over brown rice, Turkey meatloaf, and Low-fat eggplant parmesan.

The Health and Wellness Center at IACH featured "Supermarket Nutrition: Shopping for Good Health" as the Video of the Month for March. Other activities included Body Fat Screenings and Nutrition counseling at the Fort Knox High School and Middle Schools.



It's not too late to submit your design for the new SP coin!!

New Coin Design Contest

The Office of the Chief, SP announces a contest to design a new edition of the SP Corps Coin. The coin we have now is actually the third generation (see photos). All members of the SP family are encouraged to submit design ideas to MAJ Sara Spielmann NLT 1 May 2004. The goal is to have the new coins available for when the new Corps Chief takes office in November 2004.



1st Coin

2nd Coin

3rd Coin

Physician Assistant Symposium continues to set the Distance Learning Standard

*CPT Brent Archer
PA Fellow
Army Medical Specialist Corps*

As the Project Officer for this year's annual Professional Postgraduate Short Course Program (PPSCP), I probably had it a little easier than past Project Officers. The difference was that I didn't have to actually procure the speakers that were to cover the topics that prepare a PA for their Recertification Examination, which must be passed every 6 years. This year, the Department of Health, Education and Training

(DHET) contracted out to Anteon Corporation to provide qualified speakers to present topics that we could utilize for our resident course, satellite broadcast, and a CD ROM (s). Since the 2002 Symposium, DHET has been utilizing distance-learning technologies to reach a greater audience.

The short course, named the Physician Assistant Readiness and Recertification Preparation Symposium (PPSCP#6H-A0626), is designed to provide a broad-spectrum of continuing medical education in diseases, disorders, and medical assessments. This year's course was held February 23-27 at the AMEDDC&S, Ft. Sam Houston, TX. There were a total of 70 participating resident PAs. Of that number, there were 30 centrally funded Active Duty Army PAs, 7 Air Force PAs, 6 civilian service PAs, 2 National Guard PAs, 2 Army Reserve PAs and 1 Public Health Service PA. The resident course serves as the nucleus event for which additional distance leveraging techniques such as our satellite broadcast and CD-ROM helped and continues to help deliver hours of Continuing Medical Education (CME) and Continuing Education Units (CEU) to a greater audience. Thirty-four and a half hours of Clinical Category I CME and 3 hours of Professional Category I CME was Pre-approved by the American Academy of Physician Assistants (AAPA) for a total of 37.5 Category I CME, in which, 20 of those CMEs (23 CHEs) were satellite broadcasted throughout the US and the World. Two CD-ROMs worth 34 Clinical Category I pre-approved CMEs by AAPA and 37 CEUs taken from the lessons being presented in this year's course have been formatted to CD and is in reproduction to be distributed to the field.

In FY 2002, MAJ Anne Albert served as the project officer responsible for incorporating distance learning (DL) methodologies to the annual PA Recertification Course. The project continues in keeping with the Surgeon General's initiative to maximize technologies in training and offer training to PAs, and other health care professionals who otherwise would not be able to receive CME/CEU and resident recertification training. Along with planning and executing the five day resident course, it was determined in FY 2002 that training opportunities could be leveraged using current available technologies-which resulted in that year's satellite broadcast and the development of a fully self-contained, web enabled CD ROM. A template/framework was developed for the resident course and CD based on the National Committee of Certification of Physician Assistants (NCCPA) testing guidelines. With the CD, the student is able to control time, location, and pace of training. If the student achieves a post module test score of over 70%, then a CME Certificate is produced for CME purposes. The 2004 CD will be available in two parts. The FY 04 CD (Part I), worth 17 Pre-approved CMEs, is available now by ordering through ATRRS at <https://www.atrrs.army.mil/>, scrolling down the right side to **Self Development**, double click, then follow the on screen instructions to enroll. If assistance is needed, call the Non-Resident Instructional Branch (AMEDDC&S) in charge of the distribution and marketing of our product at 1-800-344-2380 or DSN 471-5877 or commercial at (210) 221-5877. The FY 04 CD (Part II) will be available at the beginning of this summer 2004. The 2002 CD-ROM content is currently being reviewed and updated to reflect new literature so that its cycle of 15 hours of Pre-Approved CME can continue for another 2 years.

This year for the satellite broadcast, we charged ourselves to deliver more CMEs and a product of quality and professionalism in regards to viewer reception. In doing that, we decided to utilize the assets of Health Services Visual Information Division (HSVID) studio. Historically, we had not before presented the satellite portion of the course from a television studio. We thought that the overall quality and options available during programming would outweigh the drawbacks such as not having the resident attendees in front of the instructors and having to stand still while presenting. According to viewer feedback, the format was a success and the viewer did not notice the drawbacks that we were concerned about. As the Master of Ceremonies, I personally thought that utilizing the studio was exciting and I was probably more comfortable not having an audience directly in front of me. The satellite broadcast had 183 sites registered with a total of 912 individual PAs, Nurse Practitioners, nurses, and paraprofessionals from the Army, National Guard, Reserve Components, Air Force, Navy, Public Health Services, VA, and the Canadian Armed Forces that participated. We were able to connect to sites in Canada, Germany, and Korea but unable to connect to
(continued on next page)

Physician Assistant Symposium continued:

Afghanistan, Kuwait, and Iraq due to VTC/VTT availability and command priority. We are still awaiting some sign-in sheets from Site Facilitators, but at this time we have a total of over 15,000 logged CME hours that were viewed. If you multiply 15,000 times \$60.00 (average cost of a CME which usually includes a conference registration fee + per diem/travel cost divided by the average number of CMEs usually offered at a conference), the savings to the US Government was over \$900,000-not counting the overhead.

Among other duties and responsibilities as Project Officer involved in this year and next year's (FY 05) symposium, I was/am charged with finding a few instructors to speak on readiness issues that affect Army PAs. This year we had instructors give us updates on 91W Training, Human Resources, NCCPA, and the State of the Army PA. Our next PA Recertification Symposium will be the first week in November 2004 to avoid conflicting with unit deployment schedules. We have contracted out again but this time we are going to task the contractor to give us more topics but spend less time focusing on one topic. We want to keep much of the same involving Readiness Issues but add topics such as tactical combat casualty care. If you have witnessed a lecture or you yourself have a lecture that you think is unique and relevant to the Army PA medical practice, we may be able to centrally fund you to attend our course in November and pick up some CME at no cost to you as the traveler as long as you present your lecture. If you know of someone else that you think the residents would benefit from hearing speak, please get in contact with me with your POC information at (210) 221-7896/DSN: 471-7896 or email me at gregory.archer@amedd.army.mil.

The announcement letter for the November PA Readiness and Recertification Preparation Symposium will be posted soon to the SP and PA Web pages.

I would like to acknowledge and thank several people that truly care and are passionate beyond the call to duty in making the PA Symposium continue to what it has become today: COL Hooper, COL Tozier, LTC Kuwamoto, MAJ Albert, Mr. Steve Van Gilder, Ms. Rosemary Thurston, Ms Cecelia Gravett, and Mr. Ricardo Robinson.



IPAP Faculty Goes to Print

The faculty of the Interservice Physician Assistant Program (IPAP) published findings of research on the performance of IPAP graduates in the January 2004 issue of *Military Medicine*. The article entitled "Performance of Military-Trained Physician Assistants on the Physician Assistant National Certification Examination" compared the national certification examination pass rates for IPAP graduates with those of accredited civilian programs. Comparison of the pass rate for first time examination takers showed a statistically significant difference between IPAP graduates when compared with those from civilian training programs. The rate of pass for IPAP graduates in 2000 was 96% versus a 92% pass rate for graduates of civilian programs. The 2001 pass rates were 93% for IPAP versus 91% for civilians and in 2002, the pass rates were 92% and 90% respectively.

Colonel Morrey appointed as the Department of Defense representative to the National Commission on Certification of Physician Assistants (NCCPA)

In January 2004, Colonel Sherry Morrey was appointed by the Office of the Assistant Secretary of Defense, Health Affairs, as the DoD representative to the National Commission on Certification of Physician Assistants (NCCPA). One senior Physician Assistant (PA) from each military service was nominated to fill the position most recently vacated by Colonel William Tozier who had served in this capacity for the past 4 years.

The NCCPA establishes the criteria and standards governing PAs obtaining and maintaining national certification through examination and completion of medical and professional continued medical education.

Membership on the NCCPA Board of Directors also includes representatives from The American Academy of Family Physicians, American Academy of Pediatrics, American Academy of Physician Assistants, American College of Emergency Physicians, American College of Surgeons, American Hospital Association, American Medical Association, American Osteopathic Association, Association of American Medical Colleges, Association of Physician Assistant Programs, Federation of State Medical Boards of the U.S., the U.S. Department of Veterans Affairs, and PAs and members of the public at large.

SPs in the News!

SP Officers participate in San Antonio Race for the Cure



On 27 March 2004 SP Officers from San Antonio joined the SP Corps Chief, COL Rebacca Hooper in the annual Race for the Cure. Over 27,000 participants ran or walked in the event to raise money for the Susan G. Komen Breast Cancer Foundation. The event provided another opportunity to bring SP Corps Officers together from each AOC and share in some fun!

SPs in the News!!

Oprah Visits OIF Soldiers at BAMC

CPT Shane Koppenhaver
BAMC Physical Therapy

To the shock and pleasant surprise of thousands of Brooke Army Medical Center (BAMC) staff and patients, Oprah Winfrey visited and interviewed seven wounded Operation Iraqi Freedom (OIF) soldiers at BAMC on March 24. Despite the late notice and relative secrecy, the BAMC entrance and hallways were full of BAMC staff, patients, family and friends eager for a glimpse of the famed talk show host.

Oprah Winfrey said the purpose of her visit was to put the numbers, reported by the media, with a face of the Soldiers injured in the Global War on Terrorism. She interviewed soldiers with all types of orthopedic injuries, amputations, and burns, at various stages of treatment.

SGT Shawn Monroe (pictured with CPT Shane Koppenhaver below left) sustained severe bilateral lower extremity injuries October 2003 during a mortar blast in Iraq. He had a left transfemoral amputation in January 2004 and is non-weight bearing with external fixation of his right lower extremity. He was interviewed in the BAMC physical therapy clinic where he just started walking (on only his prosthetic) a few days prior to the interview.

Silver Star recipient, SSG Rashaan Canady (pictured below right) had a right transradial amputation after being injured by a blast injury in Iraq in April 2003. He was interviewed in the BAMC occupational therapy clinic where he has made tremendous progress working with the OT staff.

Oprah Winfrey concluded her visit with a 30-minute gathering with spouses of BAMC medical staff deployed to Iraqi and Afghanistan. **The upcoming show, titled: "The Oprah Winfrey Show: Life After the War," is scheduled to air April 6.**



The best thing about the future is that it only
comes one day at a time
Abraham Lincoln

SPs in the News!

Congratulations to the following SP Officers who were selected for promotion to Major!

Joel Bachman
Garry Berndt
Kurt Brower
Keith Butler
William Crawford
Kathy Daigle
David Dundore
David Freel
Lisa Giese
Norman Gill
Tommy Harrison
Robert Hays
Cynthia Jones

Marty Litchfield
Clifton Loyd
Michelle Mardock
Leonard McNeil
James Mills III
Roman Reyes
Denis Robert
Thomas Ruediger
Dale Rush
Shane Spears
Michael Thompson
John Vondruska
Sherry Womack



SP Officers Part of Team Earning International Research Award

The Discovery Health Clinical Excellence Award in Back Care at the 2004 International Federation of Manipulative Therapists Congress in Cape Town, South Africa was awarded to Air Force Maj Julie Whitman for her group's research entitled "A COMPARISON BETWEEN TWO PHYSICAL THERAPY TREATMENT PROGRAMS FOR SUBJECTS WITH LUMBAR SPINAL STENOSIS: A RANDOMIZED CLINICAL TRIAL."

This research is a multi-center collaborative effort between physical therapists at BAMC and Wilford Hall Air Force Medical Center over the past 3 years. The research team also includes the following individuals: LTC (Ret) Timothy W Flynn, Lt. Col. Robert S Wainner (USAF), MAJ Matthew B Garber, Army Reserve MAJ Michael Ryder, Lt. Col. Howard Gill (USAF), Dr. Donald Atkins, formerly of the BAMC Neurosurgery Service, Capt. John D Childs (USAF), Julie M Fritz of the University of Utah, and former Air Force PT Andrew Bennett.

The intention of the award was to recognize the best research presentation in the area of low back pain.

TAMC

On 21 February, MAJ Moriyama, CPT Nicholson, & 1LT Wozney volunteered via the Hawaii Dietetic Association in Molokai (a very small neighbor Hawaiian island). They were there helping the local health clinic with a special cardiac risk reduction program. It was a positive experience. They provided individual dietary education to about 60 Molokai residents on heart healthy eating habits.

DACH Ft. Hood TX

January 2004 - LT Shannan Gormley was promoted to 1LT.

January 2004 - SPC Tamaki Cobb, PFC Maria Gonzales-Sanchez, PFC Cynthia Lewis, and PFC Ena Wilson deployed with the 31st CSH in support of OIF 2.

February 2004 - MAJ Colleen Kesselring redeployed after 11 months serving with the 21st CSH in Operation Iraqi Freedom.

SPs in the News!

GLWACH Ft. Leonard Wood MO

CPT Frietch published four articles for her column in the post newspaper called "Ask the Dietitian". Great Job!!

IACH Ft. Knox KY

CPT Mauzy participated in the 5K cross-country run and obtained the silver medal for the women's category. Great Job!!

WRAMC DC

A ribbon-cutting ceremony was conducted on 17 February to officially conclude the renovation project at the Nutrition Care Dining Facility. MG Kiley and COL Jaffin participated in the ceremony.

Congratulations to LTC Christine Parker who recently married! Her new name is now LTC Christine Newman Levy!

APTA Orthopaedic Section 2004 Rose Excellence in Research Award Recipients at the 2004 APTA Combined Sections Meeting in Nashville, TN. Congratulations to LTC (Ret) Tim Flynn and other members of the research team from the BAMC Orthopaedic PT Residency, AMEDD Center and School, Wilford Hall Medical Center, and the University of Pittsburgh.



Left to right: COL Stephen Allison, MAJ Dan Rendeiro, LtCol Robert Wainner, Dr. Julie Fritz, Maj Julie Whitman, LCDR Jake Magel, MAJ Matt Garber, LTC (Ret) Tim Flynn.



A special thank you to those who contributed to the SP Medallion Newsletter!